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DECEMBER 3 1977

THE NEWSWEEKLY FOR PHARMACY

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Chemist & Druggist

The newsweekly for pharmacy

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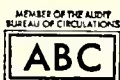
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Comment

High Street survival

Headlines such as "High Street price war hotting up" have been a regular feature of national Press city pages over the past few months, particularly since Tesco abandoned the use of trading stamps, but there has been little sympathy expressed for the independent or smaller trader who is an inevitable casualty in any such war.

In the grocery sector the strategy of the participating multiples is aimed at securing increased (or at least maintained) volume sales, with profits appearing to be a secondary consideration. Tesco, for example, reported last week that in the ten weeks following their stamp policy change, turnover increased by an astonishing 43.6 per cent—compared with only 14.4 per cent in the preceeding 14 weeks. Yet in the combined 24 week period, an increase in turnover of £83.4m (compared with the equivalent 1976 period) produced additional net profit before tax of only £102,000. Indeed, net margin was down from 3.26 per cent to 2.60 per cent.

With margins such as these, it is inevitable that the multiple grocers will look even more closely at the high-margin part of their inventory, which includes many items sold by chemists. And in their search for "volume", they will be prepared to cut prices heavily—5-10 per cent may not keep an independent pharmacy in business, but it looks very healthy in comparison with the couple of per cent picked up on some bread-and-butter (literally) grocery lines. Among multiple chemists, Boots also report a real-volume advance in the half-year ended September, with sales up 17.8 per cent compared with inflation's 15 per cent. However, their profitability, unlike the grocers', was an improvement—the net pre-tax being up by 26.4 per cent.

All this may be good news in the stock markets, but one retailer's volume increase must reflect another's volume decrease when set against "a background of depressed consumer spending" (to quote Boots' directors). Certainly there is no reason to believe that the "High Street war" has succeeded in increasing consumers' spending power by more than the price-cuts, and the losers are the small and the independent.

A recent issue of the advertising industry weekly, *Campaign*, highlighted the fact that the "war" has boosted the concept of "co-operative" advertising, in which a manufacturer contributes to a multiple retailer's promotional budget in return for in-store and media support. The level of pressure large retailers are now able to bring to bear on manufacturers is described as "blackmail", and doubt is cast on whether the manufacturers concerned actually get what they believe they are paying for—let alone value for money. On the other hand, one grocery manufacturer told *Campaign* that when promotional money is given to small retailers, they use it.

The same article, quoting a leading advertising agency executive, points out that widespread use of co-operative advertising is detrimental to brand franchise. Clearly this is no more in the interest of branded-goods manufacturers than it is of the smaller retailers to whom brands represent a high proportion of profit-earning capacity—as opposed to the loss leader, store-traffic incentive, etc, position they hold in many multiple outlets.

Without the existence of the independent retailer, manufacturers would be under even greater pressure from the High Street giants. In their long-term interest they must encourage his survival by adopting pricing and promotional policies that allow him to become competitive once again.

Benn

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Recriminations over 'DUMP' in London

There has been criticism of the lack of publicity for the London DUMP campaign from some of the pharmacists involved. They felt the publicity was either inadequate or mishandled and some believed the money could have been better spent on health education. In some areas, as many medicines were being returned now as during the campaign and special local collections are having to be arranged.

However, the central publicity organisers—Thames Regional Health Authorities—have denied that publicity was inadequate and claim that much of the responsibility for a disappointing response rested with pharmacists.

Mr Colin Hitchings, area pharmaceutical officer, Camden and Islington AHA, said he felt that local organisation of the campaign was satisfactory but the publicity was disappointing. By the end of the first week only 35 of the 110 pharmacies in his area had received any unwanted medicines. Pharmacists had complained, "No-one knows anything about it."

Local publicity criticised

Mr H. Layer, a member of the joint Barking and Havering, and Redbridge and Waltham Forest steering committee, told *C&D* they had been criticised by the central committee for going ahead with local publicity two weeks before the campaign started. Their information had been issued following approaches from local newspaper reporters who had seen DUMP notices in pharmacies. The local steering committee had achieved good publicity, but the Press release from the central committee describing the launch of the campaign had arrived too late for the local newspapers to use.

Miss Maureen Tomison, head of the Pharmaceutical Society's publicity, said that although the Society was represented on the central steering committee it was actively dissuaded from giving guidance on publicity. "We were deeply disappointed that the steering committee did not see fit to take advice given over many months about publicity for the campaign."

A spokesman for the Thames Regional Health Authorities told *C&D*, however, that there had been wide coverage on television and most newspapers had reported the campaign fully. The success had also depended on the enthusiasm of the pharmacists involved. Generally, if the response was disappointing, much of the blame lay with the pharmacists—in some

areas only half had taken part. They appreciated the publicity efforts of local committees such as Barking and Havering but felt that the publicity would have more impact if co-ordinated centrally so as to start on the same day. Some Essex hospitals had reported a reduced incidence of admissions due to poisoning, which was evidence of the campaign's success.

Pharmacy motion is second most popular

The Parliamentary "early day" motion seeking more funds for community pharmacies had been signed by 106 MPs when *C&D* went to press. It had the second highest number of signatures of any motion standing.

Conservative women survey pharmaceutical service

Conservative women are carrying out a survey of the pharmaceutical, dental and ophthalmic services in the West Midlands as a project for presentation to their annual conference next spring.

Four pharmacies in each of the 61 constituencies are being asked the following questions: "Do you feel that generally the pharmaceutical service is working well? If not, what would you like to see done to improve the situation? In what way could the pharmaceutical profession offer more

or better service to the public? Are you happy with the present way of remuneration? If not, how could it be improved? Do you consider payment for prescriptions should be altered, if so, in what way? What steps do you consider should be taken to halt the closing of pharmacies?"

The National Pharmaceutical Association, in consultation with the Pharmaceutical Services Negotiating Committee, is considering what advice, if any, to give to pharmacists who approach them for guidance in answering the questions. The Pharmaceutical Society has contacted branch Press officers in the area.

Campaign success for Ontario pharmacists

Ontario pharmacists believe their recent drug safety campaign has been worthwhile and has led to a better understanding with customers.

The "take an extra step for drug safety" programme was developed to enhance the professional image of the pharmacist and to explain to customers why certain drugs could only be sold under the pharmacist's supervision (*C&D*, November 12, p73). Schedule C of the Health Disciplines Act requires pharmacists to exercise personal control over popular OTC medicines such as antacids, analgesics, cough and cold remedies. The pharmacist must be told by his customer what medication is wanted, then assess the customer's needs in relation to the medicine's properties. The public had objected to the inconvenience involved and believed chemists were deliberately making things awkward for them.

The campaign cost \$30,000 and involved newspaper, radio and television advertising together with display material for the pharmacists' use. Products needing referral to the pharmacist for advice were marked with purple price tags.

The Ontario pharmacists' Press advertisement (see story column 3)

Your pharmacist takes an extra step for drug safety

During recent years, drug misuse has become a problem of major proportions. Not just illegal drugs. But the kinds of drugs used everyday by thousands of Canadians. Sleeping aids. Cough syrups. Even certain vitamins. Over 2,000 drugstore products in all. Each of them is safe with proper use, but possibly harmful if used improperly.

That's why the Government of Ontario has passed new laws to help control the use of many common drugs. These regulations require that the purchase of certain drugstore products must be approved by the pharmacist.

At your pharmacy, these products will be identified for you with a colourful purple sticker. All you need to do is take your selection to the prescription counter, have it approved by the pharmacist, then take it to the checkout area of your choice along with your other purchases.

It means a few extra steps for both of us. But it's an extra step for drug safety, and we think that's a good thing.

Because drug misuse should be everyone's concern.

ONTARIO PHARMACISTS' ASSOCIATION

NHS 'advance' to change with inflation

The 80 per cent "on account" advance prescription pricing sum is to be adjusted by a factor to allow for inflation with effect from January 1, 1978.

The Pharmaceutical Services Negotiating Committee had proposed an increase to 82 per cent to offset net ingredient cost inflation but the Department of Health preferred a factor adjustment which would be the same for each contractor and subject to continuous monitoring, periodic review and amended when necessary. At last week's PSNC meeting the Department's reply was discussed and the Committee agreed to accept the proposal. A spokesman told *C&D* that the result of either method would be about the same.

Stock order 'principle' agreed

The Committee considered a request from the Department that a stock order scheme be introduced whereby general medical practitioners would be provided with a separate form on which to order intra-uterine devices and suturing materials. Where the GP did not wish to order such devices on stock orders they would remain available on FP10. The Committee was prepared to agree in principle provided the scheme included in addition to intra-uterine devices and sutures, the supply of vaccines, disposable syringes and disposable needles, and that the service should be adequately remunerated.

Representations are to be made to the Department for the inclusion of Keto Diastix and Dextrostix in Part VE of the Drug Tariff. Their inclusion would allow supply against orders on FP10.

PSNC agreed to hold a special meeting on December 8 to consider the Clothier Committee report.

Further representations are to be made to the Department on the continuing practice of GPs supplying influenza vaccine direct to their patients. A statement by Sir Henry Yellowlees, chief medical officer of health, to the Department that only people at special risk should normally be given protection, was noted.

The chairman, Mr R. Worby, read a letter from Mr Moor indicating that, due to his imminent retirement, he was resigning from PSNC. Mr Worby expressed the Committee's appreciation to Mr Moor for all his help and the many ways in which he had contributed to Committee meetings as the Co-operative Wholesale Society representative. On behalf of the members and officers Mr Worby wished Mr Moor a long and happy retirement.

Mr John Griffiths (right), MPS, West Bromwich, receiving a portable television from Mr Barry de Zwaan, Crest brand manager, Proctor and Gamble. Mr Griffiths won the prize in a recent Branded Goods competition for Enterprise members with a Crest display intended to link pharmacy and dental health. Looking on are Mr Dick Turner, Enterprise merchandising manager, and Mr Graham Shaw, P&G area manager



New JIC scales effective from January 2

New (minimum) rates of pay for pharmacy managers, pharmacists, dispensing assistants and shop assistants come into effect from the first pay day in the week commencing January 2, 1978. The rates were agreed by the National Joint Industrial Council for Retail Pharmacy (England and Wales). They are:—

Managers—annually

Weekly turnover (£)	Provincial (£)	London (£)
600-699	3,364	3,421
700-799	3,450	3,507
800-899	3,537	3,594
900-999	3,623	3,680
1,000-1,099	3,710	3,767
1,100-1,199	3,797	3,854
1,200 and over	3,884	3,941

Pharmacists—annually

Year after registration	Provincial (£)	London (£)
First year	2,796	2,851
Second year	2,906	2,961

Dispensing assistants—weekly

Age	Provincial (£)	London (£)
20	36.30	36.63
21	37.13	37.45
22	37.95	38.28
23	38.78	39.10
24	39.60	39.93

Shop assistants—weekly

Age	Provincial A (£)	London (£)	Provincial B (£)
16	20.43	20.70	20.18
17	23.77	24.04	23.52
18	27.23	27.50	26.98
19	28.71	28.98	28.46
20	30.31	30.58	30.06
21	33.33	33.60	33.08

The dispensing assistants and shop assistants agreement now permits an employer providing an essential pharmaceutical service to apply for an authority to pay up to 15 per cent lower rates if the combined NHS and counter turnover is less than £1,000 per week.

Where a pharmacist is called on to perform rota duties in compliance with

arrangements under the National Health Service, payment shall be made as follows: weekdays £1.10 per hour; Sundays, weekly short days and customary holidays £2.75 per hour.

'Which?' tests 110 cameras and electric shavers

Good value among 110 cameras are the Agfamatic 1000S and 2008 Tele; Voigtlander Vitoret; Halina super miniflash; Hanimex XP2; and Minolta Autopack 470, according to this month's *Which?*. "Worth trying" are the Kodak Mini-instantmatic S30; and Rollei E110, and "good but pricey" is the Minox 110S. The report compares 33 cameras, all 110, from £10 to £150. Also in the issue is a "route map" to find the type of camera that would suit particular needs.

Among electric shavers, *Which?* recommends as good value the Boots 3000 and 4000; Ronson RS25; Remington Selectro 12; and Philishave de luxe. The report suggests looking at one or two shavers before deciding and says the testers did not find large differences between foil, bar-cutter and rotating cutter types.

Anti-rheumatics compared

Aspirin still remains the most logical therapeutic starting point in rheumatic diseases because of its low cost, according to the latest *Drugs and Therapeutic Bulletin*. However, there is little to choose between the non-steroidal anti-inflammatory drugs for effectiveness and unwanted effects because patients respond in different ways, making a trial and error process unavoidable.

The bulletin points out the importance of defining a therapeutic goal. If pain is the dominant feature, a simple analgesic such as paracetamol may prove effective; for morning stiffness, increasing the bedtime dose of anti-inflammatory or a suppository may help.

Accurate information needed for drug abuse control

Accurate information is the essential prerequisite of any mature policy on drug abuse control and there is sufficient flexibility in the Misuse of Drugs Act 1977 (Ireland—*C&D*, June 11, p866) to develop a surveillance system similar to that in Norway, believes Mr Aidan O'Shea, president, Irish Pharmaceutical Union.

Speaking in "Immediate problems of drug abuse in Ireland" at a three-day postgraduate medical conference in Dublin last week, Mr O'Shea was the only pharmacist of 20 speakers. He outlined the Norwegian system of prescribing and dispensing surveillance, which applied data processing to prescription information from pharmacies.

The aim was to obtain a complete, rapid and detailed picture of prescribing and consumption patterns over successive quarterly periods, Mr O'Shea said. Individual patient information was analysed for consumption of each narcotic drug by number of packs, number of daily doses, and a list of prescribers and pharmacies concerned. Individual doctor analysis provided the number of packs and daily doses per patient, and total prescriptions and doses prescribed.

If the amount of drug consumed by a patient or the pattern of consultations (for example, with several doctors) indicated a drug dependence, a confidential letter was sent by the health authorities to all pharmacists and doctors. That limited the opportunity to obtain supplies by deceit. The patient was then channelled to a single doctor who assessed and referred him for specialist therapy. The designated GP could then prescribe within the limits of a specialist regime.

Failure to justify prescribing

If a doctor was found to be prescribing narcotics in large amounts for young patients, or large amounts for use in his practice, he was required to justify it, in writing, to the health authorities. If he failed to do so, he was warned; if a warning failed, his case was referred to an expert council of judges and doctors, which could remove his right to prescribe narcotic drugs. The system had brought a sharp decline in the prescribing volume of narcotics in Norway since 1970, as well as providing the health authorities with a detailed quarterly analysis of the age, sex, and geographical distribution of patients concerned, their changing drug preferences, and the prescribing habits of

doctors. Its deterrent value was clearly proven, Mr O'Shea believed.

The Irish MDA Act included, under the definition "controlled drug", most of the problem drugs in Ireland today, but no statute or enactment, would substitute for the judgment and ethical performance of the medical and pharmaceutical profession in controlling drug abuse. "Society will state its own verdict on all of us in due time," he said.

Mr O'Shea compared a suburban home, where a group of adults met in the evening, had some drinks and talked about politics with a student's flat where a group of young people met, smoked marijuana and talked about the establishment. The first would probably be called a party, the second drug abuse. He used the comparison to show that judgment of drug abuse was subjective and owed its lack of objectivity to such personal factors as age, social position, wealth, and even professional defensiveness—that visceral loyalty which protected the greyest sheep in the professional flock in times of danger. Such loyalty was a powerful force against influencing a profession to respond to certain changes in society, he said.

Irish pharmacy dental health competition

The Irish Dental Association recently ran a pharmacist's window competition as part of a dental health week. Pharmacists were asked to devise a display using products and novelty items that would emphasise the importance of dental hygiene. There were 72 entries (photographs) from 1,149 eligible pharmacies and the winner was Coen's Pharmacy, Gort, Co Galway. The manager, Mr James Conway, won a fridge-freezer. The competition was sponsored by Addis through Gillespie & Co Ltd, their representatives in Dublin.

A dental health week has been organised annually involving school visits and newspaper competitions for children. Chemists provided a back-up service to the promotion and during the past year joint dentist-pharmacist committees had been set up around the Republic to liaise on dental hygiene promotion. The Irish Dental Association told *C&D* that although only 72 competition entries had been received, Irish pharmacists supported the promotion of dental health and co-operated well with displays.

People



New ICML director

Mr David Coleman has been appointed director of Independent Chemists Marketing Ltd. He is also a member of the Pharmaceutical Services Negotiating Committee and has served on the Board of the National Pharmaceutical Association for the past five years.

Mr Coleman qualified in 1960 and for the past 13 years has owned a pharmacy in Stalham, Norwich. He says Numark is important for businesses such as his, which cannot exist on National Health Service dispensing alone. "Without a counter trade, my village wouldn't have a pharmacy—and there are many other areas similar to my own. In many cases, a good counter trade is preserving a network of dispensing pharmacies throughout the country that may otherwise not be there. Additionally, the NHS would suffer if we could not maintain OTC profitability."

Mr Donald Royce, a member of the National Pharmaceutical Association Board of Management, was still in hospital on Wednesday as *C&D* went to press, after a car accident on Wednesday November 23. It is understood that he has a broken arm but no other physical injuries although he is reported to have only regained consciousness on Monday.

Death of Unichem founder

Mr Ernest Skues, FPS, a founder of Unichem Ltd, died on November 24. He qualified as a chemist and druggist in 1901 and started his own business in 1913. He was one of the founder-directors of Unichem in 1938 and became successively managing director and governing director. Mr Skues was a member of the Executive of the National Pharmaceutical Union from 1945 to 1950 and president of the

Proprietary Articles Trade Association in 1946. Other appointments included the presidency of the London County Pharmaceutical Association and the Photographic Dealers' Association.

Mr Geoffrey White, MPS, marketing director of Unichem, writes: The death of Ernest Skues in his 93rd year is an extremely sad occasion for all who have been associated with Unichem. As one who worked with him from way back in 1951, I would like to pay a brief tribute to his memory on behalf of all my colleagues, both past and present. All who came in contact with him—firstly as the managing director and subsequently as the governing director of Unichem—can remember him with only fondness and high regard. In everything he did, Ernest Skues left his imprint as a man of great integrity and fair-mindedness. It is not given to many of us to leave a permanent memorial of our life's achievements, but no-one can now think of Unichem without at the same time remembering the man who made it all possible. In spite of all he achieved, Ernest Skues remained a very modest man who always shunned the limelight, much to the regret of those of his friends and colleagues who were unable to accord him publicly the credit he deserved.

Chadwick: Recently, Mr Thomas B. Chadwick, MPS, Rivermead, Pullborough, West Sussex. Mr Chadwick qualified from Manchester University in 1922 and worked in retail pharmacy before joining Morgan Brothers Ltd, publishers of *C&D*, where he was a north of England representative and in charge of the Manchester office. Between 1939-45 he was a member of the National Pharmaceutical Union's administrative staff before rejoining Morgan Brothers as assistant to the publisher of *C&D*. From 1948 until his retirement in 1964 he was advertising manager of the Pharmaceutical Society's journal.

Olver: On November 16, Mr Harry Bernard Olver, MPS, of 32 Rushlake Road, Coldean, Brighton. Mr Olver qualified in 1939 and was in retail pharmacy in Brighton until 1976.

Mr J. S. Padwick, MPS, past-chairman of the Brighton, Hove and District branch of the Pharmaceutical Society, writes: Brighton, Hove and District have lost a much loved and respected colleague in the passing of Bernard Olver, who for some 24 years was in practice at the pharmacy at Coldean on the outskirts of Brighton. Mr Olver built up a reputation for kindness and service to the community, which those living in the area will sorely miss. Always a non-assuming man, Bernard Olver had an ever-ready sense of humour and duty.

Mr Olver had held office as president of the Brighton and Hove Association of Pharmacy, and had been an active member of the local branches of the Pharmaceutical Society, the National Pharmaceutical Association and the Proprietary Articles Trade Association.

Topical reflections

BY XRAYSER

On-going

In an idle moment at the weekend I applied myself to the golden opportunities page of one of the national newspapers, wondering, not for the first time, how I would measure up to the stringent requirements. I decided to be quite fair and not confine myself to the pharmaceutical openings, the advertisement for one of which demanded that I must have a proven track record—a requirement, I found, not exclusive to pharmacy. I attempted—quite impartially, I do assure you—to find my place.

The first notice to gain my interest was a little discouraging, for it said, unequivocally, that I would be a graduate of exceptional ability. Modesty compels me to admit that I am not. But I seemed to fill the bill in one respect, for they said that it was unlikely that I would be under 32. If only I had been a graduate of exceptional ability! I found there was an obsession with age. Ideally, one said, I should be aged 25-40, and I agree with that categorical statement, while another thought that the applicant was unlikely to be over 40. Still another says that my probable age will be between 32 and 40—an assumption that, in my case, is quite unwarranted. But hope began to stir when I read that candidates under 40 were unlikely to have the necessary experience.

I passed quickly over the next, which wanted a "young marketing highflyer" concluding, regretfully, that at no time would I have fitted that description. Another said that I had got to be a problem solver and a fast closer, but was silent in the matter of what had to be closed. I realised, with another, that I was not likely to be acceptable where the requirements were that I should be deeply involved in the restructuring of the existing sales force and methods or organisation. I have never regarded that as my *forte*. Neither have I an in-depth knowledge of what constitutes "a superb software back-up", any more than I consider that I possess numeracy and communications skills. But it is a friendly and intimate world. All I have to do is apply to Tony, Jenny, Jim, Bob or Don. How Mr Dombey would have loved it all!

Barefoot doctor

I note that, as was anticipated, the General Medical Services Committee of the British Medical Association is opposed to pharmacists screening patients for hypertension. That does not surprise me. As a pharmacist, I am opposed to taking on any such function. I have never aspired to the position of medical orderly. It is a pity that the Council of the Pharmaceutical Society, when the matter was discussed at the October meeting, did not listen to Mr J. P. Kerr, who said that such screening could only increase the doctor's workload, and that people would be referred back to the physician after having been screened in situations in which they would not otherwise have been screened, when they had no clinical indication of hypertension. It would not, Mr Kerr went on, be to the credit of pharmacists if they were to start to take over what was a technician's job. He rightly pointed out that pharmacists could do the testing, but all the other problems were medical, adding, forcefully, that the only people who would benefit from the exercise would be those who wanted to sell the tablets that were supposed to cure the condition.

Opportunity

The opportunity was there when the Council met. Its general practice subcommittee reported plans received from the manufacturers and recommended that the firm should be asked not to proceed in involving pharmacists pending the outcome of current discussions with the BMA, and that the BMA should be informed that the subject of screening was to be included in the agenda of the meeting of BMA and the Society on October 27. That eminently commonsense proposal was turned down by the Council. There seems to be an urge to become involved in matters which are not the province of the pharmacist.

Trade News

Two types of Aminogran

Aminogran, for the dietary management of phenylketonuria, is now available as two separate packs, say Allen & Hanburys Ltd, Bethnal Green, London E2. As the daily requirement for Aminogran food supplement (500g, £31.68) increases as the child grows whilst the daily dosage of Aminogran mineral mixture (250g, £5.36) remains constant, the two packs will obviate the potential wastage of the original composite pack. However the composite pack may be supplied until existing stocks are exhausted.

Change in Oilatum emollient

Stiefel Laboratories (UK) Ltd, Wellcroft Road, Slough, Berks, say that in anticipation of EEC regulations on dyes for pharmaceutical preparations being implemented, the dye will be removed from Oilatum emollient early in 1978.

Also, dandruff has been approved by the Department of Health as an additional indication for which Polytar liquid may be prescribed on FP10.

Large pack for Euhypnos

A pack of 500 capsules (£20 trade) has been added to the Euhypnos range, say Montedison Pharmaceuticals Ltd, King-maker House, Station Road, Barnet.

Smaller pack of Halciderm

Halciderm topical is now available in a 15g pack (£0.75 trade) as well as the 30g pack, say E. R. Squibb & Sons Ltd, Reed Lane, Moreton, Merseyside.

Kleenex chiefs new packs

Kleenex chief packs of eight paper handkerchiefs, from Kimberley-Clark Ltd, Larkfield, Maidstone, Kent, have a new design in dark blue, turquoise and orange aimed at improved content visibility and better brand identification.

Caloreen 100g available

Caloreen sachets 100g (10 × 100g, £4.18 trade) are now available, say Roussel Laboratories Ltd, Roussel House, Wembley Park, Middlesex.

Change in gauze swabs

Gauze swabs 12 ply, 5 cm square BPC (100, £0.75) have replaced the 16 ply gauze swabs from Cuxson Gerrard & Co Ltd, Fountain Lane, Oldbury, Warley, West Midlands.

Glen comic cards

The latest on-pack offer on Glen toilet rolls from British Tissues Ltd, 101 Whitby Road, Slough, Berks, features Billy

Bunter, Dan Dare and Stinker Murdoch. All these characters are from vintage comics whose front pages have been reproduced in colour on cards as collectors items. There are six sets to collect, each containing three cards, including the *Hotspur*, *Beano* and *Puck*, which was printed in 1904. Purchasers must collect seven labels and despatch them with a 15p postal order to cover postage. The cards are part of the Glen gift bonanza which enables consumers to obtain free children's gifts in time for Christmas. Alternatives include Enid Blyton books, Conway Stewart pens and colouring books.

Wilkinson's Brazil trip prize

A fortnight for two in Brazil at carnival time is the main prize in a trade competition launched this week by Wilkinson-Sword Ltd, Sword House, High Wycombe, Bucks. The holiday will be taken in February 1979 and includes all travelling and accommodation expenses plus £500 spending money. For the runners-up, there are five prizes of a visit to the Mardi Gras in Marseilles or Fasching in Germany.

To enter the competition, the retailer has to estimate the time of day that a photograph of Rio was taken—to the nearest hour, minute and second. One attempt may be made for every ten pairs of Wilkinson Sword scissors ordered before February 28, 1978. Entry forms are currently being distributed by the company's representatives.

Cutex products repackaged

Chesebrough-Pond's Ltd, Victoria Road, London NW10 6NA, have relaunched their Cutex hand and nail care products in silver and burgundy packs bringing them into line with the company's Strongnail range of shaded nail polishes. The aim is to improve shelf identification. The products include a cuticle cream (£0.53), oily cuticle remover kit (£0.49), Strongnail base coat (£0.50), moisturising hand cream (£0.50), Supershine top coat with nylon (£0.60), and emery boards in three sizes (£0.21). As an introductory offer on these newly-packaged products consumers will receive a free pack of emery boards and a nail care guide.



Dylash available again

Dylash eyelash dye has been out of the shops for some time but Lon (UK) Ltd, Powis Terrace, London W11, say that it is available again in new packaging. The tube (£1.70) gives approximately 10 applications.

Almay special offers

Plastic packs, containing more than twice the usual amount of Almay deep moisture cleansing lotion, skin tonic and moisture lotion (£1.60), have been introduced as winter bonus by Almay (London, New York), 225 Bath Road, Slough, Berks. Almay are also offering two combination packs, one for normal skin (skin tonic and moisture cream, £1.80) and one for dry skin (extra creamy cleanser and extra moisture guard, £2.25).

December Vestric promotions

Promotions from Vestric Ltd, Chapel Street, Runcorn, Cheshire WA7 8A, include Beyond conditioner, Bic razor, Brut 33 after shave, Famel children's linctus and honey and lemon and syrup, Kotex, MD4, Mum Rollette and refills, Night Nurse, Philips health lamps (three models), Pure and Simple skin cream and lotion, Radox herbal bath, Rennie Digestif tablets, Sunsilk hair spray, Vaseline Intensive Care hand cream and lotion, Voigtlander Vitoret 110 camera, Whistling Pops and Zubes.

on TV next week

Ln—London; M—Midlands; Lc—Lancashire; Y—Yorkshire; Sc—Scotland; WW—Wales and West; So—South; NE—North-east; A—Anglia; U—Ulster; We—Westward; B—Border; G—Grampian; E—Eireann; CI—Channel Island.

Band-aid: All except B, E
Beecham's Powders hot lemon: All except M, So, E
Benylets: All except Ln, M, U, E
Blue Stratos: All areas
Denim: All areas
Imperial Leather foam bath: All except U, G, CI
Ladyshave: Ln, M, Lc, WW, So, A
Night Nurse: All except E
Old Spice: All areas
Parkers cough linctus: Ln, M, WW, So, A, We, CI
Pears shampoo: All areas
Philishave: All areas
Polaroid 1000 and Instant 10: All except E
Remington M3 shaver: All areas
Rennie: M, Y, NE, Sc, G, B, WW, A, We
Smitty: All areas
Stowaway: All except WW, U, We, B, E, CI
Vitarich: Lc
Wright's soaps: All except U, E

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toothbrush until
you have seen the
KENT
1978 BONUS OFFER
...Now on,
and the best yet!



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Telephone: Hemel Hempstead (0442) 51531.

I would like your representative to call ☐
I would like to receive more information of your
toothbrush bonus offer. ☐
Name _____
Address _____

Dept. TB, G. B. Kent & Sons Ltd.,
River Gade Works,
London Rd., Apsley,
Hemel Hempstead,
Herts.

New products

Photographic

Low-price cine camera

A super-8 cine camera to sell at around £22.50 has been launched by Paul Plus. Called the Plus Super-8, its specification includes removable hand grip, black finish, film drive powered by four penlight batteries housed in the base of the camera, film scale in feet and metres, hinge-open back and a run/lock/continuous-run control for the trigger grip. The viewfinder is of the direct-vision type and the lens is of standard focal length set for "universal focus". On the side of the camera is the weather-dial exposure control which sets for sunny/bright/cloudy/movie light to accommodate a wide range of filming situations.

The camera comes in presentation box with a clear and concise book of instructions. The special case is an optional extra, at around £2.75 retail.

On an order for 12 cameras, the dealer price falls to £13.30 and the case to £1.27, which the suppliers believe makes it one of the lowest priced super-8 models on the market.

Also from Paul Plus is an addition to the Plusblitz flashgun series, the model CA-40 (guide price £16). With a guide number of 35 for ASA 25 film (feet), it has computer operation for flash duration of 1/20,000 to 1/50,000 second and 1/2,000 second on manual (Paul Plus Ltd, Hempstalls Lane, Newcastle, Staffs ST5 0SW).

Cosmetics and toiletries

Coty lash conditioner

Coty are introducing a protein lash conditioner (£1.95) which is described as a transparent creme concentrate which coats the lashes with a texturing film. Applied each night after cleansing it is said to help lashes "keep their healthy resilience" (Coty Ltd, 941 Great West Road, Brentford, Middlesex TW8 9DU).

Willow products

Willow Retail Proprietaries Ltd have recently taken over L'Evita cosmetics and perfumes and the first product to be launched is the L'Evita range of fragrances, described as "distinctive perfume for the individual". There are three products in the range; an eau de parfum (25g £2.75) an eau de Cologne (50g £3.75) and a parfum (20ml £5.75) and a dark blue merchandiser is supplied free. A gift set is also available (£6.50) and there are bonuses on opening orders.

A dealer promotion is now available on

the Willow range of floral fragrances giving a trade price of £6.50 for 1 dozen 2oz spray Colognes with a special retail price of £1.10 each spray (normal price £1.40) (Willow Retail Proprietaries Ltd, Falconhurst House, 20b Cliddesden Road, Basingstoke, Hants).

Electrical

Clairol launch a new hairdryer

The Clairol appliance division of Bristol-Myers has launched a new pistol-grip hairdryer, the Clairol 500 (£9.45). It is a lightweight dryer, with a power output of 500 watts, a detachable styling nozzle and a single heat/speed setting.

The Clairol 500 is navy with white lettering, packaged in a box with a "cosmetic" feel to it. The pack can be used as a showcard or a shelf display, as the front opens to reveal a "double-page spread" (Bristol-Myers Co Ltd, Stamford House, Station Road, Langley, Bucks).



Terivite capsules (30, £1.95) a vitamin food supplement by Willow Retail Proprietaries Ltd. Described as a balanced mixture of vitamins and mineral concentrates (see Willow products)

Non-ergotamine Migraleve is the one anti-migraine specific you may sell over the counter

Sales (and prescriptions)
are still rapidly rising.
So check your stocks now.

Over half a million
prescriptions for
Migraleve have produced
no adverse reports.



NON-ERGOTAMINE Migraleve®



International Laboratories Ltd. Lincoln Way, Windmill Road, Sunbury-on-Thames, TW16 7HN.

Professional News

Pharmaceutical Society of Northern Ireland

Forty names to be removed from Registers for failure to pay current fees

The Pharmaceutical Society of Northern Ireland is to remove about 40 names from its Registers with effect from December 10, for failure to pay the current fee. The secretary, Mr W. Gorman, reported to last month's Council meeting that of the 40 members, associates and students, seven or eight were proprietor pharmacists and a number were overseas residents.

Mr T. O'Rourke asked when Part III of the Medicines Act 1968 was to be implemented and if any information was available following the comments submitted some time ago about substances in the general sale list and list of restricted items. Mr Gorman said he understood Part III of the Act was to be implemented in February 1978 but he had not received any information recently about the contents of the lists. Mr Gorman is to write to the Department of Health.

Mrs Muriel Singleton, BSc, MPS, was nominated as the examiner in pharmacy legislation for the year ending July 31, 1978. The secretary explained that where more than five years had lapsed between a student's graduation and application for registration as a pharmaceutical chemist the student was required to pass an examination in pharmacy legislation held by Council. One such student was due to complete the practical training period in early 1978 and an examination would therefore have to be held. Mrs Singleton's nomination would have to be approved by the Department of Health.

PhD and practical training

Mr J. Kerr asked if more had been heard of Council's proposals to recognise as practical training a six-month period of the course followed by a PhD course. Mr Gorman said a brief amendment had been recommended by the Education Committee and adopted by Council. It had been sent to the Department of Health in March and another amendment had been sent in July. That procedure was recommended by the Department as the one least likely to cause delay. He thought the reason for the delay was that the Department might have further alterations to put to Council. Mr Kerr said regulations were made by Council, not the Department, and if the delay continued, a number of graduates with a PhD would be unable to register as pharmaceutical chemists. The secretary is to take the matter to the Department.

The education committee has recommended that the Theophilus

Harper Foundation, financed from the Society's funds, should continue to be available but minor alterations should be made in the rules governing its award. Presenting the report, Mr O'Rourke said the Committee recommended rule 5 to be amended to "Applications should be submitted to the secretary not later than May 1 and will be considered by the Finance and Education Committees before an award is made in July." The Committee also recommended that clause 3 of the C. W. Young Scholarship Fund trust deed be amended to authorise Council to make awards in addition to its existing power to provide prizes. That arose from a request for financial help to undertake research or investigate some aspect of the practice of pharmacy. The proposed amendment would permit Council to offer assistance. Professor D'Arcy disagreed with the Theophilus Harper Foundation amendment. He said some students were not informed of their degree results until late July or early August. Mr O'Rourke

said applications could be accepted from undergraduates but an award could only be made to a member or student. The president, Mrs C. O'Rourke suggested the deletion of the words "in July" and the recommendations were then adopted.

FIP membership to be renewed

Mr R. G. Dillon, presenting Finance Committee reports said that after consideration the Committee recommended FIP membership be renewed in 1978. The rents for use of the Society's premises were reviewed and increases recommended. The committee also pointed out that greater use could be made of the lecture hall for trade shows and displays and recommended publicity for the facilities available. The reports were adopted. Messrs Cleaver, Fulton and Rankin were re-appointed as solicitors and Messrs Muir and Addy as auditors.

Professor D'Arcy reminded members of four lectures on successive Tuesday evenings commencing November 22 on pathology of diseases in the community. A series of eight at weekly intervals is to follow from January to March.

The Council dinner has been provisionally booked at Dunadry Inn on March 8. The Society has received: Medicines (Certificate of Analysis) Regulations 1977; Medicines (Fees) Amendment (No 2) Regulations 1977; Misuse of Drugs (Designation) Order (NI) 1977; Misuse of Drugs (Amendment) Regulations (NI) 1977.

'Is government in league with drug industry?'

To what extent is the government in league with the pharmaceutical industry in boosting the price of drugs overseas? This was one of the questions asked by Sue Barlow of the Haslemere Trust at a recent Socialist Medical Association meeting.

She said she had no substantial evidence on which to base an answer to this question but it was clear that the government tended to ignore the findings of its own commissions on the industry, for example the Sainsbury Committee. The fact that prices were controlled by a voluntary agreement rather than by statutory control was a pointer, Ms Barlow thought, of the Government's reluctance to interfere with the pharmaceutical industry. Over and over again, she said, the importance of the industry's contribution to the balance of payments was stressed and with such an attitude it was impossible to charge realistic prices.

Sue Barlow admitted that her main interest was the way the pharmaceutical industry operated in the third world. But she said that activities in this area could not be viewed in isolation as they were probably an extension of activities in the West. What made drug companies' actions seem worse in the third world was that they took advantage of the less strict

control exercised by those countries.

As she could not envisage as yet the third world countries having the power or interest to legislate against the drug companies, the control should be by the exporting rather than the importing country. This would regulate the industry both at home and abroad. Although nationalisation of the pharmaceutical industry appeared to be the ideal solution, Ms Barlow did not think it was practicable and piecemeal legislation was more feasible.

Advertising was one area where she thought legislation could be effective. Although some agreement had been reached recently, Ms Barlow wanted to see the abolition of all advertising with the exception of data sheets. This, plus control of the package inserts, would help diminish the overuse of drugs in the third world where at present drugs were advertised for a much wider range of indications than allowed in the United Kingdom or the United States.

Prices could also be controlled by legislation but Ms Barlow was doubtful about the transfer pricing system (where profits made in a high tax area are transferred to a low tax area, eg the Bahamas) as this was a common practice among all industries and would require EEC legislation.

Treasures of the Society's historical collection

By far the most valuable, extensive and historically important part of the Pharmaceutical Society's historical collection is not the spectacular objects—the pots, pestles, and other paraphernalia of pharmacy—displayed in the museum showcases, but the historical collection of books in the library, which must be given pride of place in any description of the Society's treasures, said Mr R. G. Todd when speaking at the joint evening meeting of the Pharmaceutical Society and the British Society for the History of Pharmacy.

In December 1841, just seven months after its formation, the Society acquired the tenancy of no 17 Bloomsbury Square, and an economically furnished room awaited only the erection of bookcases and the receipt of books to transform it from a library in name to a library in fact.

Jacob Bell's appeal

In a spirited appeal, Jacob Bell urged members of the Society to assist in the transformation, "without delay, by furnishing such materials as their means might enable them to afford and their liberality might suggest". There was a handsome response to Bell's appeal. By the end of 1842 the library contained 746 volumes, of which 570 had been donated by members, and among the early donations were a number of works which today constitute some of the most treasured and highly prized possessions. From that time forward, the library grew steadily in size and usefulness. In 1860, it was transferred to a larger room and two further rooms were added later as well as various bookstores in the basements of several of the houses in Bloomsbury Square to meet the expanding needs of the library which today contains some 60,000 books and manuscripts, including several thousand books of great historical interest.

During the 135 years of its existence, the library has been particularly fortunate in the support it has had from members who have presented or bequeathed important and rare books to its collection. The most notable addition was the presentation by Sir Thomas Hanbury in 1892 of the Hanbury Library, originally the property of his brother, Daniel Hanbury, who, during his lifetime, had been one of the greatest friends and supporters of the library. That collection of about 550 volumes includes many books of great historical importance and also many richly illustrated botanical works. There is the

Latin Herbarius of 1485 and the *Ortus Sanitatis* of 1491. The earliest manuscripts include a fascinating recipe book written by a physician or apothecary between 1450 and 1500, some recipe books and commonplace or stillroom books written during the Tudor period, and several in a variety of hands from the 16th to the 18th century, as well as a large and varied collection of 19th century prescription books. There are extensive collections of early and rare printed works on pharmacy and medicine and associated subjects such as alchemy, chemistry, and botany, the botanical collection being especially rich in superbly illustrated flora.

Mr Todd referred to the collection of materials relating to pharmacy of the past, the greater part of which had been collected during the past 40 years. The most important items were perhaps the ceramic collection; the collection of bell-metal mortars; the collection of 17th century drugs, and the extensive collection of prints and drawings relating to medicine and pharmacy of the past and including many 18th and 19th century caricatures of pharmaceutical interest. Among the 200 English Delft drug jars, many with 17th and 18th century dates, are some which are believed to be the earliest examples of their kind. The bell-metal mortars, some of which date back to mediaeval times, are mainly English, but there were some very fine examples of foreign workmanship.

The collection of dispensing and general pharmaceutical equipment of the past, needed extending before it presented a coherent picture of the historical development of pharmacy and phar-

maceutical techniques. Mr Todd then referred to the large selection of prescription envelopes, chemists' trade cards and early medical and pharmaceutical advertisements, some valuable early microscopes, a collection of medicine chests, two fine *Materia Medica* cabinets, complete with drugs, a great variety of pharmaceutical equipment "and a thousand and one items coming under the heading of chemists sundries." There was also a large collection of photographs collected over the past 100 years and relating to most aspects of pharmacy. It was the only section of the collection that had not yet been comprehensively catalogued. "...regrettably, time has never been available to undertake what has now become a formidable task."

Postscripts

Antique cabinet catalogued

An early 18th Century mahogany cabinet of materia medica designed for Corby Stacey & Co, 300 High Holborn, London and now at the Pharmaceutical Society has been catalogued by Mr D. C. Harrod, pharmacognosy research laboratory, Chelsea school of pharmacy. A description of the Holborn premises appeared in *C&D*, January 25, 1896, when the firm closed the last of its retail businesses and became wholesalers only. The cabinet was then housed in a room of the senior partner, Mr Henry Stacey, until the laboratories moved to new premises in 1908 and Mr S. Lloyd Stacey presented it to the Society's museum.

Pharmaceutical historians will be interested to know that the cabinet tins were not original but made by Messrs Kettle of Holborn; according to the Society's library catalogue they were made when the cabinet came to the Society in 1895—an obviously incorrect date, Mr Harrod says. Most labels are not attached to the tins but to wooden drawer partitions and consequently there is no guarantee that specimens are in their original places. Mr Harrod lists over 650 items in the cabinet's 25 drawers.

Another drug tariff course at Bradford

The postgraduate school of studies in pharmacy, University of Bradford, is again holding a residential course (fee £75 plus VAT) on "The Drug Tariff and management efficiency in the NHS general pharmaceutical service." The aim of the course, from January 3-7, 1978, is to help participants become more efficient both economically and in providing a community health care service.

Principles of accountancy and finance will be covered and there will be a detailed examination of the Drug Tariff. Special attention will be given to prescription endorsement, elastic hosiery, oxygen service and appliance supply.

The organisers wish to encourage a

wide range of applicants, including pre-registration graduates and recently qualified pharmacists. For the third year the course is sponsored by Scholl (UK) Ltd. Further details from course tutors Drs T. G. Booth and I. F. Jones, pharmacy practice research unit, University of Bradford, Bradford BD7 1DP, West Yorks.

Small business group to study pharmacy

The Conservative Party Small Business Bureau is setting up a study group to consider problems facing pharmacists. The group will be chaired by Mr John Cope, MP, vice-chairman, Parliamentary smaller businesses committee. Representatives of the PSGB, PSNC and NPA have been invited to contribute, as have a number of independent chemists.

Letters

'Special case' pharmacists

While the controversy continues over whether or not the PSNC is eligible to become a trade union, might I once again present the case for my own union, ASTMS general practice pharmacy section? Our membership comprises individual pharmacists, and not company representatives; the PSNC does not represent employee pharmacists, however far you care to stretch the definition that we are all employees of the Department of Health.

Owners of pharmacies are contractors to the Department and not employees!

ASTMS GPP section's views are moderate, but we are firmly behind the profession of pharmacy. We want prosperity for our members, we want to provide the kind of medical services our customers want, without too much state interference, we want to stop the abuse of the funds available to the health service and, as much as possible, we want to stand on our own two feet, and have some dignity. Let us have a monopoly in the sales and dispensing of all medicines, and negotiate from a position of strength and integrity with the Department. If you put your trust in the PSNC you will still be arguing the same points in ten years time, those of you, that is, who are still in business! Join ASTMS's growing membership, and we could achieve our objectives in the space of a year or two. Until we have over 50 per cent membership of general practice pharmacists, we feel that we do not have a mandate to act.

Longstanding frustrations

Do pharmacists really want to perpetuate their frustrations *ad infinitum*, or do those of you with a grievance want the problems solved within our working life-span?

I have heard chemists grumbling about their lot ever since I was a student, first attending my local branch meetings. While many members of our profession dither about, our money-spinning lines are being sold increasingly by that expanding and lucrative new pseudo profession called "drug stores". Why did any of you ever bother to qualify, if the rewards are better without MPS after your name? If you are worth your salt stand up and be counted! Frankly look at the facts: the PSNC, with the best will in the world, cannot succeed because its theoretically maximum membership is too small and too impoverished to make much headway. The PSNC cannot represent employee pharmacists, or their interests. ASTMS has funds, and has capable negotiators,

everybody who is a pharmacist can join, and you are not obliged to contribute towards any political party. This is a fact of trade union membership.

For my personal part, I feel that pharmacists are a special case in the wages struggle. All members of the community are important in their jobs and the part they play in the continuation of a civilised existence. If any particular section of the community takes "industrial action," we all suffer to some degree or other. Perhaps if we had a "meritocracy" where people are paid according to their skills, pharmacists might come out much better off than they do at present. I find it highly distasteful to read of certain workers striking for more than their fair share of the cake; when I examine their pay and skills required to do their job, I realise that

pharmacists are frequently much worse off, and have far greater skills to boot!

ASTMS might be able to convince the necessary powers that be, that the four years of intensive study, with no guarantee of qualifications at the end, should be rewarded adequately. Compare us with the dentists!

Fellow pharmacists, stand up and be counted, write to me for an application form, and show that you did not study in vain. If firemen and car workers think they are important, then pharmacists are much more so, and our skills are well beyond those ever imagined by those two bodies of workers!

"Geraint Davies"
ASTMS general practice
pharmacy section
London NW1


**3
WAYS TO
PROTECT YOUNG
CHILDREN**



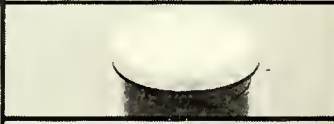
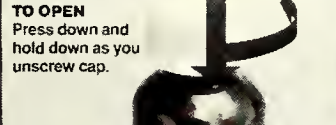

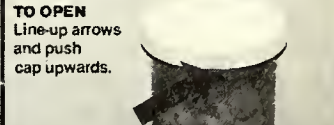
How to use safety caps on medicine bottles.

These three bottle caps are designed to baffle children under the age of five.

Most people can use them quite easily, but if you have special difficulty, ask your pharmacist for advice.

Anyway, keep all medicines out of the reach of children - as yours may be extra clever!



1. CLIC-LOC	2. POP-LOK	3. SNAP-SAFE
 <p>TO OPEN Press down and hold down as you unscrew cap.</p>	 <p>TO OPEN 1. Press dot on cap. 2. Lift tab and pull cap off.</p>	 <p>TO OPEN Line-up arrows and push cap upwards.</p>
 <p>TO CLOSE Screw up tightly. A reverse turn should give a 'click'.</p>	 <p>TO CLOSE Replace cap and press tab down.</p>	 <p>TO CLOSE Snap on in any position and turn arrows apart.</p>

REMEMBER - ALWAYS KEEP MEDICINES OUT OF THE REACH OF CHILDREN

Three manufacturers of child resistant closures—Cope Allman Plastics Ltd, Metal Box Packaging Ltd, and UG Closures & Plastics Ltd—have produced this poster explaining how to use CRCs. The design was approved by the Pharmaceutical Society and Department of Health. Mailing to hospital pharmacies, doctors' surgeries and children's clinics has started but the poster will not be sent to general practice pharmacies until January 1978, because it was felt that retail pharmacies already received so much mail in the pre-Christmas period that the poster could be overlooked

General health screening 'not worth the cost'

There is not enough evidence that general health screening is worth its cost, Dr M. F. D'Souza, St Thomas' Hospital, last week told a symposium on health risks at work.

An unpublished trial carried out in South London has found no significant difference in death rates or hospital admissions between a group of middle-aged people who were screened and a control group who were not. Dr D'Souza believed routine health screening was a luxury the country could not afford, for three main reasons—present techniques were not good enough at detecting serious diseases; if such diseases were detected there was often little doctors could do; and many patients were reluctant to take drugs such as antihypertensives for life when there was a chance they might never suffer ill-effects from their high blood pressure.

However, Dr D'Souza felt that research should continue into new methods of screening, which must be tested rigorously before being "extensively and expensively" enforced.

Professor Geoffrey Rose, St Mary's Hospital Medical School, described a heart disease prevention project currently involving 49,167 men from 66 factories in the UK, Belgium, Poland and Italy. Screening examinations and measures aimed at controlling the main risk factors—blood cholesterol, smoking, blood

pressure, lack of exercise and obesity—are being carried out to discover whether risks can be reduced and, if so, is there any effect on the incidence of heart attacks.

Preliminary results have shown that individual counselling produces better results than general health education in persuading men to give up smoking, lose weight and take more exercise. Posters and films, for example, made people aware of what they ought to do but advice from a specialist team was more likely to persuade them to take action. Professor Rose pointed out that screening was only useful when followed by vigorous action.

Dr Felicity Edwards, Employment Medical Advisory Service, stressed the need for doctors to warn patients taking tranquillisers and antihistamines about the risks of drowsiness at work, particularly if they were also likely to drink alcohol. She said that the increasingly "widespread and uncritical" use of psychotropic drugs meant that many people were "feeling better but doing worse" at their jobs.

Illegal heroin use up

Illegal use of heroin has probably increased eightfold in Britain since early 1975, according to a *Daily Telegraph* survey reported this week. Most users were white and middle-class. A senior police officer is quoted as saying the main distribution centre for heroin had moved

from London to Liverpool where the Triad Chinese secret society had a stronghold. However, Persian heroin was also increasing in Britain.

Also in the *Daily Telegraph* a book "Cannabis now" by Dr James Graham pharmacology professor, Welsh National school of medicine and a member of the advisory council on misuse of drugs, is said to call for changes in the cannabis laws. It proposes that the Misuse of Drugs Act 1971 be amended to allow controlled private use of cannabis with a review after five years. Cannabis effects are compared to alcohol, tobacco and aspirin. Dr George Birdwood, chairman of the Drug Information and Advisory Service says in the *Telegraph* report that it was "highly questionable to regard cannabis as safe either individually or socially". He says cannabis could accumulate, unlike other drugs.

News in brief

□ LRC International have signed a new agreement whereby Merrell-National Laboratories pharmaceutical division will continue the research and development on candidin in the USA.

□ Ciba-Geigy's "Safety in laboratories" has been revised and extended. Up to five copies are available free from Group Information Department, Ciba-Geigy (UK) Ltd, Simonsway, Manchester M20 5LB. Larger orders will be charged at £0.25 per copy.



A large stock of medical products are just hours away from your pharmacy, when you use the Barclays service. Your telephone order will be dealt with quickly by experienced staff and delivered by one of the 230 vehicles in our national transport fleet. Why not ring your next order to the local Barclays branch – it will make all the difference.

Barnsley 0226 6055 Belfast 0231 65155 Birmingham 021 472 7171 Blackpool 0253 23961 Bolton 0204 73441 Brighton 0273 62251
Cardiff 0222 564841 Coventry 0203 462832 Croydon 01 688 5116 Darlington 0325 61491 Eckington, Sheffield 024 683 2175
Edmonton, London N18 01 803 4801 Grimsby 0472 58111 Horsforth, Leeds 0532 589311 Leicester 0533 881354
Leslie, Fife 0592 743255 Liverpool 051 922 2732 Newport, Gwent 0633 73391 Northampton 0604 31615 Nottingham 0602 862581
Portchester, Hants 07018 81124 Port Dinorwic, Gwynedd 0248 670401 Queensferry, Clwyd 0244 812887
South Shields 0632 552473 Stoke on Trent 0782 659451 Swansea 0792 34831 Wednesbury 021 556 4471 York 0904 27451



Barclays

the national company with the local service

Company News

New Wellcome Foundation international division

Wellcome Foundation Ltd have formed an international division within the group production directorate to mobilise the company's technical expertise in the design, operation and utilisation of production resources in its manufacturing activities around the world. The division, which is based at group headquarters in London, is headed by Mr J. Mackie, MPS, formerly manager, international services division, now part of the new international division. It has two main functions—engineering services, advising on complementation of production costs, and manufacturing project services, responsible for planning and management of production resources and compliance with international codes of practice. Group engineering services are headed by Mr D. Johnson, group chief engineer. Co-ordination and evaluation of production for Wellcome units world-wide is managed by Mr G. Turnstall and control of international manufacturing agencies by Mr Bryett Cole, MPS.

ICI sales and profit drop in third quarter

Sales of Imperial Chemical Industries Ltd in the first nine months of 1977 amounted to £3,550m, an increase of 19 per cent over the same period last year. Sales in the UK increased 21 per cent to £1,424m, and overseas sales rose 17 per cent to £2,126m. In volume terms, total sales in the nine months were 7 per cent higher than in the first three quarters of 1976 and excluding the exchange movement on overseas net current assets, the profit margin was unchanged. The pre-tax profit was £414m (£428m last year).

Comparing the third quarter with the

first half of the year, sales volume was depressed both in the UK and overseas, particularly in western Europe. Third quarter sales amounted to £1,136m (£1,224m in the second quarter and £1,190m in the first) and pre-tax profit was £105m (£168m in the second quarter and £141m in the first). The company states that increasing costs now emerging in the UK are not being matched by increased prices.

Medical exports

United Medical Co International, a company 55 per cent owned by the National Enterprise Board and 45 per cent by Allied Investments, was recently formed to export services and supplies to hospitals overseas. The chairman is Dr F. Wrigley who was previously with Wellcome Foundation Ltd and adviser to Mr David Ennals, Secretary for Social Services. Mr Lyn McNeilly has been appointed chief executive.

Record Bayer UK sales

Sales of Bayer UK Ltd in the nine months to September 30 were £73.4m, a record and 35 per cent above the figure for the corresponding period of 1976. Pre-tax profit was £1.5m, an increase of 10 per cent. Mr John V. Webb, managing director, reports that all divisions of the company made a profit, but specially good results were achieved by the organics, pharmaceuticals and agrochemicals divisions. Turning to the future, Mr Webb said that it was the declared policy of the parent company to invest in a UK manufacturing plant.

On a world basis, sales in the first nine months of 1977 rose 2.1 per cent to DM16,202m, but pre-tax profit was reduced 6.1 per cent to DM849m. Bayer AG, Leverkusen, recorded a 3.9 per cent increase in sales to DM7,599m and a 12.4 per cent drop in pre-tax profit to DM552.

Briefly

Alberto-Culver Co: with effect from December 1, the head office address will be Houndsmill Industrial Estate, Telford Road, Basingstoke, Hants RG21 2YZ (telephone Basingstoke (0256) 57222; telex 858708).

Westminster report

Industrial competition

Mr Roy Hattersley, Secretary for Prices and Consumer Protection, said in a Commons answer that as a result of concern at the increasing concentration of ownership in British industry and the effect that this may be having on the economy, it had been decided to set up an inter-disciplinary group to survey the existing evidence on the causes and consequences of concentration, the factors that encourage mergers and their results, the effects of monopolies, and the effectiveness of the present competition legislation. It would have regard to competition policy in other countries and would give special attention to the implications of UK membership of the EEC.

The group would concentrate initially on possible changes in mergers and monopoly policy and the way that this is applied in the legislation. They will also make a preliminary assessment of further aspects of competition policy, including restrictive trading practices.

Chiropody anaesthetics

In a written Commons answer, Mr Roland Moyle, Minister for Health, said the proposal to limit to 1 per cent the strength of anaesthetics which may be administered by chiropodists was based on the advice of the Medicines Commission and had been included in the general proposals for implementation of Part III of the Medicines Act. Representations had been received from a number of bodies representing chiropodists, but no grounds had been found for not accepting the Commission's advice.

Whooping cough vaccine

Miss Joan Lestor is to initiate a debate on the dangers of whooping cough vaccine in the Commons on December 2.

Prevention of rickets

The Minister for Health, Mr Roland Moyle, told the Commons that despite current measures rickets continued to be a problem among a minority of children, particularly children of some Asian immigrants who have a diet low in vitamin D. To combat this, encouragement was being given to spreading information about dietary preventive measures, and a working party of the committee on medical aspects of food policy was at present considering the problems associated with the fortification of food, other than margarine, with vitamin D.

Mr Moyle pointed out that vitamin D can be toxic if too much was introduced into the body, and account was being taken of the dangers of hypercalcaemia, such as occurred in the 1950s when fortification of infant foods was increased.

Mr G. A. Trigaux, the new president and chief executive of Polak's Frutal Works Inc, recently visited the flavour and fragrance manufacturing centre at Perivale. Pictured (left to right) are Dr J. W. Davis, chairman; Mr J. R. Allan, general sales manager, PFW Perivale; Mr G. A. Trigaux; Mr E. Ryan, technical manager; Mr D. Baker, managing director, PFW



Market News

Barbiturates dearer

London, November 30: Most of the barbiturate derivatives were increased in price during the week. The size of the increase on this occasion is generally smaller than at other times in the past year. Amylobarbitone which has gone up by 30p per kg and phenobarbitone by 12p, are typical examples of this week's changes.

Spices, where changed, were mainly weaker but pepper was an exception holding its firm tone of previous weeks. Among botanicals gentian root turned a little firmer. Otherwise most prices were repeated.

There was also little price movement in the essential oil sector and trading remained in the doldrums. Currently the price differential which usually exists between Brazilian and Chinese peppermint is virtually non-existent and the same applies to menthol from the same sources.

Pharmaceutical chemicals

Acetone: £262 to £266 metric ton as to grade for 30-drum lots.

Amylobarbitone: Less than 100-kg lots £10.57 kg; sodium £11.71.

Ascorbic acid: (Per kg) £6.94; 5 kg £5.94; 25-kg £5.44 sodium ascorbate, as for the acid; coated, £7.14, £6.14, £5.64 respectively. Calcium ascorbate £7.49, £6.49, £5.99 respectively for same quantities.

Biotin: Crystals £6.66g; £4.91g in 50-g lots.

Bismuth salts: £ per kg

	50-kg	250-kg
carbonate	10.46	10.41
salicylate	8.70	—
subgallate	9.24	—
subnitrate	9.47	9.40

Butabarbital: Acid and sodium £16 kg for 50-kg lot.

Butobarbitone: Less than 100 kg £13.70 per kg.

Calcium pantothenate: £7.29 in 25-kg lots.

Carotene: Suspension £30.95 kg; 5-kg £29.95 kg

Chloral hydrate: 50-kg lots £1.43 kg.

Chloroform: BP £423 to £445 per metric ton according to drum size. In 2-litre bottle £2.48 each; 500-ml bottle £1.00 each.

Cyanocobalamin: £3.39 g; £2.39 g in 100-g lots.

Cyclobarbitone: Calcium £15.39 kg in 25 kg lots.

Ether: Anaesthetic: BP 2-litre bottle £2.88 each; 1-ton lots in drums from £1.39 in 18-kg drums to £1.25 kg in 130-kg. Solvent, BP from £1,072 metric ton in 16-kg drums to £959 in 130-kg.

Folic acid: (kg) £43.34; 5-kg £42.34; 25-kg £41.84.

Nicotinamide: (kg) £5.71; £4.71 (5 kg); £3.96 (50 kg).

Nicotinic acid: £5.71 kg; £3.96 kg in 50-kg lots.

Papaveretum: £390 kg; 5-kg lots £355 kg. Subject to Misuse of Drugs Regulations.

Pentobarbitone: Less than 100-kg £16.35 kg; sodium £16.31.

Phenobarbitone: in 50-kg lots £11.62 kg; sodium £12.62.

Potassium acetate: BPC £0.95 kg (50-kg lots).

Potassium ammonium tartrate: £1.47 kg in 50-kg lots.

Potassium bitartrate: £730 per metric ton.

Potassium citrate: Granular £887 per metric ton, powder £902.

Potassium diphosphate: BPC 1949 in 50-kg lots, granular £1.8286 kg; powder £1.5481.

Potassium hydroxide: Pellets BP 1963 in 50-kg lots £1.379 kg; sticks not offered; technical flakes £0.4577.

Potassium nitrate: BP. £0.89 kg for 50-kg drums.

Potassium phosphate: monobasic BPC 1949, £1.19 kg in 50-kg lots.

Potassium sodium tartrate: £797 per metric ton.

Pyridoxine: £26.01 kg; £25.01 (in 5-kg); £24.01 (20-kg).

Quinalbarbitone: Base and sodium in 25-kg lots £16.62 kg.

Riboflavin: (Per kg) £29.27; 5-kg lots £28.27; 25-kg £27.27; diphosphate sodium £75.88, 5-kg £74.88.

Saccharin: BP in 250-kg lots £4.20 kg; sodium £3.69.

Sodium pantothenate: (Per kg) £14.42; £13.42 in 5 kg lots.

Thiamine hydrochloride: Per kg £17.45; 5-kg £16.45; 25-kg £15.95; mononitrate as for hydrochloride.

Tocopherol: DL alpha £17.34 kg; 5-kg £16.34 kg.

Tocopheryl acetate: Oil £15.38 kg; £14.38 kg in 5-kg lots; £13.88 (20-kg). Powder 25% £14.97; £13.97; £13.47; 50% £15.66; £14.66; £14.16 respectively.

Vitamin A: (Per kg) acetate powder 500,000 iu/g, £14.56; £13.56 in 5-kg lots. Palmitate, oil 1 miu £14.83; 5-kg £13.83.

Vitamin D₂: Type 500, £24.55 kg; £23.55 (5-kg lots).

Vitamin E: See tocopheryl acetate.

Yohimbine hydrochloride: £225 per kg.

Crude drugs

Balsams: (kg) **Canada:** steady at £11.30 spot; £11.20 cif. **Copaiba:** £2 spot; £1.90 cif. **Peru:** £6.10 spot nominal; £5.98 cif. **Tolu:** £4.30 spot.

Camphor: Natural powder £5.25 kg spot; shipment £5.25 cif.

Chillies: New Guinea birdseye £2,000 metric ton.

Cloves: Madagascar or Comores £3,800 metric ton, cif.

Gentian: Root £1.40 kg spot; £1.37, cif.

Ginger: Cochin £1,120 metric ton spot; £1,000 cif. (new crop, Jan/Feb), Jamaican withdrawn: Nigerian split £1,150 spot; peeled £1,400 spot.

Menthol: (kg) Brazilian £9.45 spot; £9.20 cif. Chinese £9.50 in bond; £9 cif.

Pepper: (ton) Sarawak black £1,420 spot; £1,300, cif. White £1,920 spot nominal; £1,800 cif.

Peppermint: (kg) Arvensis—Brazilian £4.80 spot; shipment £4.75 cif. Chinese £4.75 spot and cif.

Piperata: American Far-West from £25, cif.

Pennyroyal: £11 per kg spot.

Pepper: English-distilled ex-black £160 kg.

Petigrain: £5.75 kg spot; £5.65, cif.

Rosemary: £5.75 kg spot.

Sandalwood: Mysore or East Indian £60 kg spot.

Sassafras: Chinese not quoted. Brazilian £2.20 kg, cif.

Spearmint: (kg) American Far-West £16. Chinese spot £13, shipment £12.50, cif, nominal.

The prices given are those obtained by importer or manufacturers for bulk quantities and do not include value added tax. They represent the last quoted or accepted prices as we go to press.

Coming events

Monday, December 5

East Metropolitan Branch, Pharmaceutical Society, Churchill Room, Wanstead Library, Spratt Hall Road, Wanstead, E11 at 8 pm. Discussion of resolutions for Branch Representatives Meeting.

Northamptonshire Branch, Pharmaceutical Society, Postgraduate Medical Centre, Northampton General Hospital at 8 pm. Mr J. B. Ainsworth (A. Nelson & Co Ltd) on "Homeopathy."

Stockport Branch, Pharmaceutical Society, Ashton Postgraduate medical centre at 8 pm. Talk on "Pharmaceutical antiques" and "The department of pharmaceutical sciences."

Tuesday, December 6

Barnet Branch, Pharmaceutical Society, Avenue House, N3 at 8 pm. John H. Fingerhut on "A catholic approach to healing."

Blackpool Branch, National Pharmaceutical Association, Imperial Hotel, North Promenade, Blackpool at 7.45 pm. Joint meeting with Fyde Pharmacy Forum Mr E. J. Downing (assistant secretary, NPA) on "Notices and red tape."

London Branch, Guild of Hospital Pharmacists/ASTMS, The Auditorium, The Wellcome Building, 183 Euston Road, London NW1 at 7.30 pm. J. T. Scales (professor of biomedical engineering, Royal National Orthopaedic Hospital) on "Bioengineering in orthopaedics."

North Metropolitan Branch, Pharmaceutical Society, Presbyterian Annexe of School of Pharmacy, at 8 pm. Mr. J. Wright on "Acupuncture."

Slough Branch, Pharmaceutical Society and National Pharmaceutical Association, Whitehart Hotel, Beaconsfield, 8 pm. Mr Stanley Blum (secretary GPP/ASTMS) on "Chemist contractors' remuneration: the way forward."

South West Metropolitan Branch, Pharmaceutical Society, Lecture Theatre A, St George's Hospital medical school, Tooting, London SW17, at 8 pm. Dr Louis Sharp (School of Pharmacy) on "Prussic acid, patients and professors."

Stirling Branch, Pharmaceutical Society, Station Hotel, Stirling at 8 pm. Mr. N. D. Bell on "Radiopharmaceutics."

Teesside Branch, Pharmaceutical Society, Postgraduate Centre, North Tees Hospital, 7.45 pm. Professor Paul Spencer on "Tranquillisers and antidepressants"

Wednesday, December 7

Brighton Branch, Pharmaceutical Society, Postgraduate medical centre, Brighton General Hospital, Brighton, at 8 pm. Dr F. Ratcliffe (School of pharmacy, Brighton Polytechnic) on "Sprains, strains and bruises."

Chemical Society, Analytical Division, The Auditorium, The Wellcome Building 183 Euston Road, London NW7, at 2.15 pm. AGM followed by a meeting on "The uses of electroanalytical techniques in pharmaceutical studies."

Seeds: (metric ton, cif) **Anise:** China star £8 nominal. **Caraway:** Dutch £940. **Celery:** Ind £780. **Coriander:** Moroccan £680 (Nov-Dec); Ind £470. **Cumin:** Egyptian £1,030; Turkish £1,000. **Dill:** £180. **Maw:** £575. **Turmeric:** Madras finger £695 ton spot; £650, New-crop £525, cif.

Essential oils

Bois de rose: Spot £7.25 kg; shipment £7, kg.

Cassia: Shipment £55.50 kg, cif., nominal, English distilled from bark £120 kg.

Clove: Madagascar leaf, £2.40 kg spot; £2.50, English-distilled £48-£50 nominal.

Coriander: Russian about £20 kg.

Ginger: £85-£88 kg spot.

Lavender spike: £12.50 kg cif.

Lemon: Sicilian best grades about £13.50 kg.

Eucalyptus: Chinese £2.05 kg spot; £2.15, cif.

Lemongrass: Cochin £5.20 kg spot; £4.85 nominal.

Palmarosa: No spot offers; £7.40 kg, cif nominal.

Patchouli: Chinese £12 kg spot; shipment not offering.

Peppermint: (kg) Arvensis—Brazilian £4.80 spot; shipment £4.75 cif. Chinese £4.75 spot and cif.

Piperata: American Far-West from £25, cif.

Pennyroyal: £11 per kg spot.

Pepper: English-distilled ex-black £160 kg.

Petigrain: £5.75 kg spot; £5.65, cif.

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Epsom Branch, Pharmaceutical Society, Seminar Room Epsom District Hospital, at 8 pm. Visit by Mr J. P. Bannerman (immediate past-president of Pharmaceutical Society).

Lanarkshire Branch, Pharmaceutical Society Annual dinner dance.

Plymouth Branch, Pharmaceutical Society, Moorland Links Hotel, 7 for 7.30 pm.

Sheffield Branch, Pharmaceutical Society, Jessop Hospital lecture theatre, at 7.30 pm. A discussion on resolutions for Branch Representatives Meeting, followed by film show organised by ICI "Understanding beta blockers", "The road to recovery", "Dinghy sailing."

West Metropolitan Branch, Pharmaceutical Society, Society's headquarters, 1 Lambeth High Street. Working dinner with discussion led by Mr B. Silverman (Boots Co Ltd). *This meeting has been cancelled.*

Worthing & West Sussex Branch, Pharmaceutical Society, Broadmark Hotel, Rustington, 7.15 for 8 pm. Informal branch supper dance.

Thursday, December 8

Burnley Branch, Pharmaceutical Society, Ram Inn, Cliviger, at 8 pm. Dr K. N. Leach on "The drug information service."

Crawley Horsham & Reigate Branch, Pharmaceutical Society, Queen Victoria Hospital, East Grinstead, Sussex, at 8 pm. Mr Graham Calder (deputy chief pharmacist, DHSS) on "Change and development in hospital pharmacy."

Dundee and Eastern Scottish Branch Pharmaceutical Society, Ninewells medical school, Dundee, at 7.30 pm. Smith Kline & French Ltd present films on various drug topics.

Hull Chemists' Association, Postgraduate medical centre, Hull Royal Infirmary, at 7.45 pm. Dr P. Malynn (Parfums Le Galion Ltd) on "History and development of the art of the perfumer."

Leeds Branch, Pharmaceutical Society, Golden Lion Hotel, 8 pm. Films by Merck, Sharp & Dohme Ltd.

Liverpool Branch, Pharmaceutical Society, Medical teaching centre, Hospital College, Mount Vernon Street, at 8 pm. Chris Ellis on "Bird watching."

Northumbrian Branch, Pharmaceutical Society, Tyne Room, Wheatstheaf Hotel, Woollington, at 8 pm. Mr R. Harrison (team leader, Tyne & Wear planning dept) on "Preserving our heritage."

Royal Society of Health, 13 Grosvenor Place, London SW1 at 2.30 pm. "Bacterial Food Poisoning." £0.50 charge to non-members

Swindon Branch, Pharmaceutical Society, Room 4, Wyvern Theatre, Swindon, at 8 pm. Dr James on "Cosmetics. How they work."

Friday, December 9

Bristol Branch, Pharmaceutical Society, Edward Jenner Centre, Bristol Royal Infirmary, at 8 pm. Wine and Cheese Party.

Advance information

Anglia Region postgraduate course, on "Cardiovascular diseases", North East Thames Regional Health Authority training centre, Oaklea, 47 Whitehall Lane, Buckhurst Hill, Essex, January 20-22. Details from course organiser, Dr A. Briggs, School of Pharmacy, 29 Brunswick Square, London WC1.

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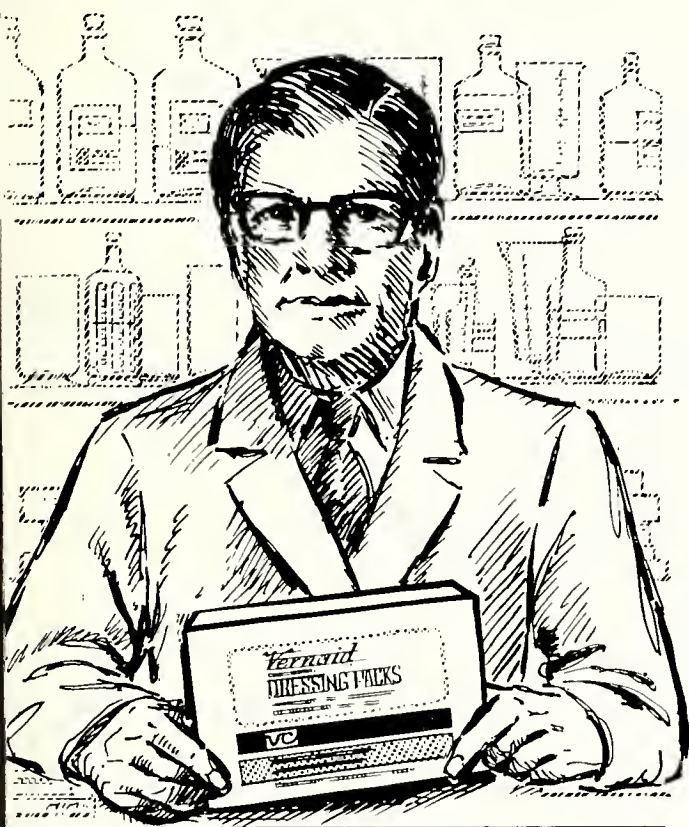
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The Trade Press in Britain



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